

VIDEO RELEASE FORM

Senior Protection Initiative High School Video Contest: Stop Abuse & Financial Exploitation (SAFE)

NOTE: Each person who appears in the video must provide a signed copy of this form.

I hereby grant the State of Delaware permission to use my likeness in the video submission by _____ (name of student(s) who created the video submission) regarding elder abuse awareness on its website, in any broadcast on local media outlets, cable television, and other forms of media, and by distributing the video submissions to third parties as the State of Delaware deems appropriate to achieve the above goal of elder abuse awareness, without payment or any other consideration. I understand and agree that the student(s) who created the video submission have given permission to the State of Delaware for such use.

I hereby irrevocably authorize the State of Delaware to edit, alter, copy, exhibit, publish or distribute and likeness in the video submission for purposes of raising awareness of elder abuse or any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the video submission.

I hereby hold harmless and release and forever discharge the State of Delaware from all claims, demands, and causes of action which, I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I am 18 years of age and am competent to contract in my own name. I have read this release before signing below and I fully understand the contents, meaning, and impact of this release.

(Signature)

(Date)

(Printed Name)

NOTE: If the person signing is younger than age 18, there must be consent by a parent or guardian, as follows:

I hereby certify that I am the parent or guardians of _____, named above, and do hereby give my consent without reservation on behalf of this person.

(Parent/Guardian Signature)

(Date)

(Parent/Guardian Printed Name)